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FACSIMILE TRANSMISSION COVER SHEET

DATE:

July 21, 2003

TO:

Examiner Matthew THEXTON

Group Art Unit 1714

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RE:

U.S. Patent Application No. 09/975,699

Entitled: A METHOD OF MAKING A MULTI-PHASE AGGREGATE USING A MULTI-STAGE PROCESS Our Ref: 97020CIP2CON3 (3600-091-04)

FROM:

Luke A. Kilyk, Esq.

FAC. TEL. NO.:

1-703-872-9310

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 27

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PTO/SB/17 (01-03)

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Complete if Known FEE TRANSMITTAL 09/975,699 Application Number October 11, 2001 Filing Date for FY 2003 Mahmud et al. First Named Inventor Matthew Thexton Examiner Name Effective 01/01/2003. Patent fees are subject to annual revision. 1714 Art Unit Applicant Claims small entity status. See 37 CFR 1.27 97020CIP2CON3(3600-091-04) Attorney Docket No. TOTAL AMOUNT OF PAYMENT (\$)110.00

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit card Money Order None		DDITIO Entity		EES Entity			
X Deposit Account	Fee Code	Fee (\$)	Fee Code	F00 (\$)	Fee Description	Fee Paid	
Deposit Account 03-0060	1051	130	2051	65	Surcharge - late filing fee or oath		
Number				25	Surcharge - late provisional filing fee or		
Deposit Account Cabot Corporation	1052	50	2052	25	cover sheet		
Name	1053	130	1053	130	Non-English specification		
The Commissioner is authorized to: (check all that apply) X Charge fee(s) indicated below X Credit any overpayments	1812	2.520	1812	2,520	For filing a request for ex parte reexamination		
X Charge any additional fee(s) during the pendency of this application	1804	Describe publication of SIR points					
Charge fee(s) indicated below, except for the filing fee to the above-kientified deposit account.	1805 1,840° 1805 1,840° Requesting publication of SIR after Examiner action						
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month		
Large Entity Small Entity	1253	930	2253	485	Extension for reply within third month		
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month		
1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month		
1002 330 2002 185 Design filing fee	1401	320	2401	160	Notice of Appeal		
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	<u> </u>	
CUPTOTAL (4) (COO OO	1452 1453	110 1,300	2452 2453	55 650	Petition to revive – unavoidable Petition to revive – unintentional		
SUBTOTAL (1) (\$)0.00 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,300 2501 650 Utility issue fee (or reissue)						
Fee from	4500 470 0500 325 Design issue fee						
Extra Claims below Fee Paid Total Claims -20**= X =	1503	630	2503	315	Plant Issue fee	\vdash	
Independent x =	1460	130	1480	130	Petitions to the Commissioner		
Claims Mutitple Dependent	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180	Submission of information Disclosure Stint		
Fee Fee Fee Fee Description	8021	40	8021	40	Recording each patent assignment per		
Code (\$) Code (\$)	1809	750	2809	375	property (times number of properties) Filing a submission after final rejection (37 CFR § 1.129(a))		
1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))		
1203 280 2203 140 Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)		
1204 84 2204 42 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application		
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	1						
SUBTOTAL (2) (\$)0.00	SUBTOTAL (2) (\$)0.00 Other fee (specify) Terminal Disclaimer						
** or number previously paid, if greater, For Relssues, see above	Redu	ced by Ba	sic Filing	Fee Paid	SUBTOTAL (3) (\$)110.6	XO 0K	

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Luke A. Kilyk	Registration No. (Attorney/Agent)	33,251	Telephone	1-540-428-1701	
Signature	Lich Mil			Date	July 21, 2003	

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